GRATITUDE, FORGIVENESS, HAPPINESS, RESILIENCE AND QUALITY OF LIFE AMONG ELDERLY: ROLE OF SAVORING

A Synopsis for Ph.D. Thesis

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GURU JAMBHESHWAR UNIVERSITY OF SCIENCE & TECHNOLOGY

HISAR (HARYANA)

Supervised By:

Dr. Taruna

Assistant Professor

Submitted By:

Minal (Research Scholar)

Roll No. - 210110090102

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Introduction

Old age is a natural and normal state, its pathologies are the same as those that affect people of any age, but disease, family crisis, unemployment, diminished income, and dependency make them worse declare Phelps and Henderson. A person over the age of 60 is considered an older adult according to the United Nations. The "National Policy for Older Persons" was adopted by the Indian government in January 1999. According to the regulation, "elderly" or "senior citizen" is someone who is 60 years of age or older (old age in India, 2021). According to the Maintenance and Welfare of Parents and Senior Citizens Act of 2007, "any person who is an Indian citizen and has attained the age of 60 years or above" is considered a senior citizen (Jeyalakshmi et al., 2011). Ageing is a natural process that is hereditarily determined and modified by the environment. The aging process causes changes in body cells. This reduces physical and mental strength, a rise in the likelihood of illness and ultimately leads to death. Sir James Ross said, "You cannot reverse the ageing process. You continue sterling as you age, maintain it, and promote it (Park, 1970). Although age wrinkles the skin, the soul is more affected by stress, doubt, dread, anxiety, and self-doubt (Park, 1970). According to the global demographic pattern, countries have experienced ageing of population with a result of time passing. The number of adults 60 or older has gone up from 1 billion to 1.4 billion by the year 2020, one in every six people will be 60 years of age or older by the year 2030. Between 2015 and 2050, the proportion of people above 60 years of age in the world will nearly double, from 12% to 22% (2.1 billion) (WHO,2022**).** The elderly population i.e., 65 and above, accounts for 8.5% of the world's population. According to a report given by the Ministry of Statistics and Programme Implementation (2021), India has 138 million elderly population including 67 million male and 71 million females. There was an increase of approximate 34 million in the population of elderly people in 2021 after the 2011 census. In 2031 it may reach 56 million. By 2050, there will be 323 million elderly people in India, or 20% of the total population of the nation (HelpAge India, 2014). More over 20% of adults 60 years of age and beyond have a mental or neurological illness, and 6.6% of those over 60 have all types of disability. (WHO,2017). The elderly population of the country is increasing at a rapid pace. In the year 2020, the number of children aged 5 years was less. Instead, the number of people above 60 years of age was high. In 2050, 80% of older people will be living in middle-income

or low-income countries. All country's health and social systems are best prepared to take maximum advantage of that country's demographic transition (WHO,2022). To ensure this they face huge challenges. Old age is a state of decline. Some of the major issues found in the elderly include health problems, lack of self-esteem, financial insecurity, loneliness, harassment, lose temper, fear, other psycho-social issues. According to a biological perspective, aging involves a variety of molecular and cellular damage over time. There are many physical problems in aging such as hearing related problems, eyesight problems, back and neck problems, bone related problems, diabetes, asthma, ulcers, speech related problems, lung related problems, respiratory diseases, excretory system problems, skin related problems, etc. (Park, 1970). In the aging process, virility changes in men and fertility changes in women and hormonal changes also happen in this stage. During old age, when a person is not physically healthy, it is natural for a psychological issues to arise. Some common psychological issues of old age are memory loss, anxiety, depression, loneliness, lack of interest, intellectual disability, despondency, hopelessness, helplessness, sadness, lack of social interest, lack of motivation, etc,.

Research has found that one fifth of the population age 60 and above suffers from mental and neurological disorders having dementia (5%) and depression (7%) worldwide. In the elderly population, 3.8% suffer from anxiety disorder and 1% suffer from substance abuse (WHO,2017). Worldwide, there will be 82 million cases of dementia in 2030, and 152 million cases in 2050. Depression can cause extreme discomfort and make it difficult to carry out daily tasks. 7% of adults over 60 in the elder population as a whole experience unipolar depression (WHO,2017). Both physical and psychological factors affect this decline.

Physical changes are normal with age but due to these, emotional disturbance and distress increase resulting in poor quality of life. When separated from the family, they are unable to adjust in the new environment and they become more sensitive to emotional and psychological problems. The feeling of loneliness, powerlessness increases due to lack of social interaction. According to Erickson's stages of psycho-social development, the final stage of life is ego integrity vs. despair, which discusses two perspectives that an elderly person can have. If one feels that their life has been unproductive, guilty about their past, or like they haven't achieved their life goals, they become dissatisfied with their lives and experience despair, which frequently results in depression and hopelessness.

Gratitude

According to Oxford English Dictionary (1989), gratitude is defined as “the quality or condition of being thankful; the appreciation of an inclination to return kindness”. According to Kant (1964) gratitude is “honouring a person because of a kindness he has done us”. According to many researches, gratitude is a positive response of appreciation towards other people or resources. (Robustelli & Whisman, 2018; Wood et al., 2008). According to Emmons and McCullough's 2003 study, individuals who felt gratitude by thinking about items they were thankful for reported feeling "better with quality relationships, higher levels of self-esteem, and increased well-being. According to McAdams and Bauer (2004), an attitude of gratitude may be especially important for older people in order to effectively complete the final stage of adult development and overcome the crisis of integrity vs despair to acquire ego integrity (Erikson 1959). By expressing thanks and cultivating an attitude of thankfulness, one can enjoy pleasant life events and circumstances, which boosts life satisfaction and develops positive strengths (Sheldon & Lyubomirsky, 2006). According to the study's findings, practising thankfulness and savoring life can improve well-being, happiness, and life satisfaction while also reducing depression symptoms and negative affective states (Maria et al., 2019).

Forgiveness

Forgiveness is process by a person to deliberately drain off the negative emotion which are associated with offensive and hurting event. According to McCullough et al. (2003), the idea of forgiveness relates to a psychological process of transformation regarding a specific violator and an offender. Forgiving people as a dispositional trait refers to individual variances in one's predisposition to do so in various circumstances (Hill & Allemand, 2010). Regardless of the offender or the circumstance, those who are more inclined to forgive are more likely to do so in the wake of a wrongdoing. This trait is positively associated with empathy (Berry et al., 2005), gratitude (McCullough et al., 2002), and negativity with neuroticism (Fehr et al., 2010), and depression (Brown, 2003). According to research, forgiving attitudes differ by age, with older and middle-aged people being more forgiving than younger and middle age individuals (Allemand & McCullough, 2012). According to Bono and McCullough (2006), those who have chronic illnesses may see their health more favourably when they forgive. According to research by Reed & Enright (2006), those who are more forgiving tend to have lower levels of anxiety, sadness, and aggression, as well as higher levels of happiness and self-rated physical health (Maltby et al., 2005; Webb and Brewer, 2010).

Happiness

According to Lyubomirsky (2007), “Happiness is the experience of joy, contentment, or positive well-being coupled with a sense that one's life is good, meaningful, and worthwhile." The state of happiness or unhappiness colours everything. Happy elderly people experience the world as more confident and safer. They take decisions, cooperate easily, high tolerant and are socially connected. Happy elder people remain more satisfied, energized and healthy in their life. (Brinol et al., 2007). Around the world, people usually want to feel better instead of feeling bad (Larsen, 2000). A meta-analysis published in the Journal of Positive Psychology found that positive emotions, including happiness, were associated with improved physical health, cognitive functioning, and social relationships in elderly individuals (Steptoe, Deaton, & Stone, 2015).

Resilience

Resilience is the ability to respond effectively to adversity, pain, tragedy, fears, or perhaps significant sources of stress, such as family and relationship problems, fitness concerns, and professional and financial stressors. It refers to recovering from trying circumstances. Resilience is described as "an ability to succeed, mature, and gain competence in a context of adverse circumstances or obstacles" by Gorden, Ingersoll, and Orr (1995). Resilience is described as "the process of coping with disruptive, stressful, or challenging life events in a way that provides the individual with additional protective and coping skills than prior to the disruption that results from the event" by Richardson, Neiger, Jensen, and Kumpfer (1990). Resilience, according to Werner-Wilson, Zimmerman, and Whalen (2000), revolves around three key elements: the capacity to change or adapt to difficult circumstances; the ability to "bounce back" and succeed; and the capacity for a determined engagement, rather than avoidance, with the relevant risk factor. Individuals who have endured significant levels of danger or adversity and have also shown high levels of competence or adaptation are said to be resilient, according to Masten and Reed (2002). Positive experiences and great resilience jointly promote happiness, life satisfaction, and depression reduction in seniors with high savoring abilities. People with lower levels of resilience were found to have a higher link between savoring and psychological well-being (Smith et al., 2015).

Quality of life

Quality of life does not merely affect the physical psychological spiritual function of the individual, but is a holistic approach that includes connections with the environment and opportunities that maintain and enhance skills (Barua, 2007). The World Health Organization

defines "quality of life" as "an individual's perception of their position in life in relation to their goals, expectations, standards, and concerns in the context of the culture and value system in which they live." It is a broad concept that carefully takes into account a person's physical and mental health, amount of independence, social ties, religious beliefs, and interactions with significant environmental factors. This concept describes quality of life as a subjective evaluation that is based on a context that includes social, cultural, and environmental factors. (WHO Quality of Life Group,1993). The terms "quality of life" and "health status," "life style," "life satisfaction," "mental state," or "well-being" cannot be used interchangeably. Instead, it is a multifaceted idea made up of how each person views the components mentioned above as well as other facets of life. In research conducted among elder people in Salem, Tamilnadu, it was observed that more than half of the respondents (52.3%) had lower level of general quality of life (Maheswari, K January 2010).

Savoring

Savoring is described by Bryant and Veroff (2007) as "the process in which people engage to attend, to appreciate, and to enhance the positive experiences in their lives" (p.2).

Savoring means “the capacity to attend, to appreciate and enhance the positive experience in one’s life” (Bryant & Veroff, 2007). When people savor, they usually broaden emotion-arousing contexts and the range of their emotions is attached with that context. It increases a person's coping ability and thought process. Some people savor positive experiences more, while some savor less. Bryant and Veroff (2007) found that women generally report greater savoring capacity than men.

Savoring beliefs

One of the fundamental ideas in savoring beliefs is the notion that people evaluate their own abilities to take pleasure in pleasant situations. We refer to ideas about savoring capacity as individual’s subjective evaluations of their own abilities to savor rewarding experiences (Bryant & Veroff, 2007).

Savoring beliefs, an important concept is “the notion that people make self-evaluations of their capacity to enjoy positive experience. We refer to people's subjective perceptions of their personal ability to enjoy positive experiences as beliefs about savoring capacity” (Bryant & Veroff, 2007).

Temporal categorization of savoring beliefs:

Bryant and Veroff, (2007) People may amplify and savor their current positive feelings from three different time orientations:

Anticipation

Savoring future occurrences is known as anticipation. In this process, individuals imagine the positive feelings occurring in the future because of specific events in life that in turn increase the positive emotions in the present moment. For instance, this summer, you might be looking forward to a vacation. If so, by thinking about what you're going to do, who's going to be there and the positive feelings you expect to feel. As a result, you create positive feelings from the event that has not happened yet.

Savor the moment

Paying attention to a positive emotion arising in the present and participating in it is called savoring the moment. To savor the present moment, one needs to be conscious with one's current experience, especially for the positive feelings derived from it. For example, anytime you experience something positive and feel good, pay attention to it and mentally catch those positive feelings by thinking about them and know about their cause.

Reminiscence

Savoring by reminiscing occurs when people "attend to positive feelings they rekindle from the past or attend to other positive feelings they experience when looking back on the past" (Bryant, Chadwick & Kluwe, 2011). For example, spend a few minutes thinking about whatever a joyful or enjoyable event happened to you in the last week or month. For example, one can enjoy thinking about hanging out with friends or thinking about completing an important project.

Savoring strategies

People savor or dampen their positive emotional experiences through two strategies: savoring and dampening. These strategies are the operational components of savoring. These are the behaviors and thoughts that amplify or dampen the duration and intensity of positive emotions. Amplifying strategies up regulate the positive emotions while dampening strategies down-regulate the positive emotions. Bryant and Veroff (2007) have worked on the theory and given 10 savoring strategies, while Quoidbach and his colleagues (2010) have offered four amplifying and four dampening strategies. There are many techniques which help in enhancing the positive qualities one of which is savoring which we can use to solve the problem of elderly population and enhance mental health and with the help of savoring it helps in enhancing the quality of life.

Rationale of the study

The absolute size of old people is considerable. A WHO estimate projects that 840 million people in developing nations would be elderly by 2050. In India, there are estimated to be 158.7 million senior people by 2025, according to projections. This shift brings with it a variety of socioeconomic and health care policy challenges for older Indians. Old age is the period in which old people withdraw from their daily activities such as work place, due to which many types of psychological social problems occur, such as dementia, agitation, anxiety, loneliness, distance from society and these psychological problems have a bad effect on health. In psycho-social problems involve feeling alone, ageing, fear, depression, distance from oneself. The average life expectancy at birth in developed nations is above 80 years, and it continues to increase (Park, 1970).

The major concern of the research is to look for the role of savoring in gratitude, forgiveness, resilience happiness and quality of life. These positive emotions help them realize that something good is going on. If we look at the research done on old people in the past, it can be seen that more emphasis has been laid on the negative factors that influence their lives. With the changing paradigm shift the present study is aimed at exploring the positive psychological capital variables leading to graceful aging. The variables taken in study are gratitude, forgiveness, happiness, resilience, savoring and quality of life. For educational counsellors and psychologists, this research may provide a unique insight to the understanding of savoring as a significant and adaptive part of elderly lives, allowing them to sail through the aging phase with grace. Further, the present research study is aims to explore the role of savoring in practicing gratitude, forgiveness leading to happiness and in making people resilient resulting in overall improved quality of life among elderly.

OBJECTIVES OF THE STUDY:

1) To explore the relationship between gratitude and savoring among elderly.
2) To explore the relationship between forgiveness and savoring among elderly.
3) To explore the relationship between happiness and savoring among elderly.
4) To explore the relationship between resilience and savoring among elderly.
5) To explore the relationship between quality of life and savoring among elderly.

HYPOTHESES OF THE STUDY

1) There will be a significant relationship between gratitude and savoring among elderly.

2) There will be a significant relationship between forgiveness and savoring among elderly.
3) There will be a significant relationship between happiness and savoring among elderly.
4) There will be a significant relationship between resilience and savoring among elderly.
5) There will be a significant relationship between quality of life and savoring among elderly.

Method

Sample

The target population of the study is elderly with age group 60-75 years. The sample size will be 320 (160 male-80 with spouse and 80 no spouse) and (160 female-80 with spouse and 80 no spouse). The sample will be drawn from the urban or rural areas.

Inclusion Criteria

- Age range of 60-75 years.
- Elderly belonging to urban or rural area background.

Exclusion Criteria

- Elderly suffering from terminal diseases.
- Elderly having major psychiatric illness.

Tools to be used in the present study

1. **The Gratitude Questionnaire (GQ-6) (McCullough et al., 2002):** The GQ-6 is a survey that assesses appreciation. This six-item assessment of thankfulness examines its intensity, density, span, and frequency. Likert scale responses are tallied, with 1 denoting the strongest disagreement and 7 denoting the strongest agreement. A more thankful attitude is indicated by higher scores. The scale has excellent test and retest reliability, great internal consistency with a Cronbach's alpha of.87, high convergent reliability with peer and well-being ratings, and discriminant validity from relationships.
2. **Heartland forgiveness Scale (Thompson et al., 2005):** HFS includes 18 items to evaluate an individual's forgiveness level. HFS is a seven-point Likert-type scale having the following range: "almost always false than true" (1) to "almost always true of me" (7). Köker (1991) reported an internal consistency coefficient of.80 and a test-retest reliability coefficient of.85. The indicator of internal consistency was.84.

3. **Oxford Happiness Questionnaire (Hills & Argyle, 2002):** OHQ is a 29-items, 6-point Likert-scale self-report questionnaire. Responses can range from strongly disagreeing to strongly agreeing. Higher scores represent a happier state of being. The scale has strong psychometric characteristics. Cronbach's alpha reliability is.91.
4. **The Brief Resilience Scale (BRS) (Smith et al., 2008):** A six-item resilience self-report scale, the BRS. Using a Likert-type scale with a range of 1 to 5, participants were asked to rate each statement's level of agreement or disagreement with each item. BRS's acceptable Cronbach's alpha value was found to be 0.71.
5. **John Flanagan's Quality-of-Life Scale:** John Flanagan developed the Quality-of-Life Scale in the 1970s 15 questions made up the original QOLS, (16-item version) evaluates five fundamental aspects of quality of life: material and physical well-being, interpersonal relationships, social, community, and civic activities, as well as personal fulfillment and progress, as well as leisure. In groups with stable chronic illnesses, the QOLS satisfaction measure demonstrated good test-retest reliability over a 3-week period (r = 0.78 to r = 0.84) and was internally consistent (=.82 to 92).
6. **Savoring Beliefs Inventory (SBI) (Bryant, 2003):** The 24-item survey measures a person's confidence in his or her capacity to appreciate rewarding situations. The SBI additionally provides three distinct temporary sub-scales of eight items that assess three different aspects of savoring: anticipating pleasure, enjoying the present, and remembering pleasure. From "1 = strongly disagree to 7 = strongly agree," the scale has seven possible points.

Procedure

The sample will be finalised using purposive random sampling. After finalising the sample, the data will be collected from the participants by administering the assessment tools for the variables. The data will be analysed with the help of appropriate statistical tools.

Statistical tools

The proper statistical method will be applied to conduct the statistical analysis as per the nature of the data.

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